



FAYETTEVILLE
STATE UNIVERSITY

University SHRA Annual Performance Appraisal Form

ANNUAL PERFORMANCE APPRAISAL CYCLE (Dates From/To):		April 1, 2017	to	March 31, 2018
Dept. Name:	Budget Office	Employee Name:	Lisa Bernard	
Dept. #:	2320	Employee ID:	830023596	Position #: 90
Supervisor Name:	Steve Mack	Employee Classification:	Accounting Tech	
Supervisor Title:	Budget Director	Competency Level:	Journey	

OR: Employee was not evaluated due to ...	Insufficient Time	On Extended Leave
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PART 8: SUPERVISOR COMMENTS ON EMPLOYEE'S PERFORMANCE

(see instructions on page 2)

LISA IS IN CONSTANT CONTACT WITH ACADEMIC AFFAIRS OR OTHER DEPARTMENTS ADDRESSING THEIR NEEDS WITH POSITION INFORMATION AND UPDATES. I HAVE NEVER HEARD OF ANY ISSUES FROM HER COLLEAGUES. HER UPDATES ARE TIMELY AND ACCURATE. SHE ALSO HAS TO UPDATE OR APPROVE INFORMATION IN PEOPLE ADMIN. HER WORK IS ALWAYS COMPLETED TIMELY.

PART 9: SIGNATURES FOR ANNUAL PERFORMANCE APPRAISAL

(see instructions on page 2)

2nd - Level Supervisor:	<i>[Signature]</i>	Date:	4/17/18
Supervisor:	<i>[Signature]</i>	Date:	4/17/18
Date of Annual Performance Appraisal Review Session with Employee:			
Employee Acknowledgement: I understand my signature below indicates: that I have received this annual performance appraisal, that my signature does not necessarily imply my agreement with the ratings given or the comments included, and that if I choose, I may write a response to include with this appraisal document.			(Check here if you are attaching comments.)
Employee:	<i>[Signature]</i>	Date:	April 17, 18

PART 10: APPEAL RIGHTS

For information on applicable appeal rights, please refer to the University System SHRA Employee Grievance Policy.